

**IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON
IN AND FOR THE COUNTY OF KING**

KNT

**NO.
NOTICE FOR HEARING
KENT REGIONAL JUSTICE CENTER ONLY
(Clerk's Action Required) (NTHG)**

TO: THE CLERK OF THE COURT and to all other parties per list on Page 2:
PLEASE TAKE NOTICE that an issue of law in this case will be heard on the date below and the Clerk is directed to note this issue on the calendar checked below.

Calendar Date: _____ Day of Week: _____

Nature of Motion: _____

DESIGNATED CALENDAR FOR JUDGE HEARINGS - REGIONAL JUSTICE CENTER

CASES ASSIGNED TO INDIVIDUAL JUDGES - RJC

☐ Without oral argument (Mon - Fri)

☐ With oral argument Hearing Date/Time: _____

If oral argument on the motion is allowed (LR 7(b)(2)), contact staff of assigned judge to schedule date and time before filing this notice.

Judge's Name: _____ Trial Date: _____

- **Working Papers:** The **judge's name**, date and time of hearing **must** be noted in the upper right corner of the Judge's copy. **Deliver Judge's copies to Judges' Mailroom at RJC**

CHIEF CIVIL DEPARTMENT – RJC

All Chief Civil calendars are at 10:00 on Fridays, except as noted. See signs posted at RJC for calendar location.

☐ Extraordinary Writs (Show Cause Hearing) (LR40(a)(2)(R))

☐ Supplemental Proceedings (9:15 am)

☐ Public Use and Necessity Hearing

☐ Certificates of Rehabilitation- Weapon Possession (**Convictions from Limited Jurisdiction Courts**)

☐ Certificates of Rehabilitation (**Employment**)

☐ Motions to Consolidate (without oral argument)

Non-Assigned Cases:

☐ Dispositive Motions and Revisions (10:30 am) ☐ Non-Dispositive Motions M-F (without oral argument)

- **Deliver working copies to Judges' Mailroom, Room 2D at RJC.** In upper right corner of papers write "Chief Civil Department" and date of hearing.

PARTIES: The address of the Regional Justice Center is 401 4th Avenue North, Kent, WA 98032. You must bring this document and appear as scheduled.

☐ Room: _____ ☐ See Posted Signs

Sign: _____ Print/Type Name: _____

WSBA # _____ (if attorney) Attorney for: _____

Address: _____ City, State, Zip _____

Telephone: _____ Date: _____

DO NOT USE THIS FORM FOR FAMILY LAW, EX PARTE OR RALJ MOTIONS.

LIST NAMES, ADDRESSES & TELEPHONE NUMBERS OF ALL PARTIES REQUIRING NOTICE
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NAME:

ADDRESS:

TELEPHONE:

ATTORNEY FOR:

NAME:

ADDRESS:

TELEPHONE:

ATTORNEY FOR:

NAME:

ADDRESS:

TELEPHONE:

ATTORNEY FOR:

NAME:

ADDRESS:

TELEPHONE:

ATTORNEY FOR:

IMPORTANT NOTICE REGARDING CASES

Party requesting hearing must file motion & affidavits separately along with this notice. List names, addresses and telephone numbers of all parties requiring notice (including GAL) on this page. Serve a copy of this notice, with motion documents, on all parties.

The original must be filed at the Clerk's Office not less than **six** court days prior to requested hearing date, except for Summary Judgment Motions (to be filed with Clerk 28 days in advance).

THIS IS ONLY A PARTIAL SUMMARY OF THE LOCAL RULES AND ALL PARTIES ARE ADVISED TO CONSULT WITH AN ATTORNEY.

The REGIONAL JUSTICE CENTER is in Kent, Washington at 401 Fourth Avenue North. The Clerk's Office is on the second floor, Room 2C. The Judges' Mailroom is Room 2D.